

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>09/27/06</u>		2 Serial/Patent # <u>09/758,532</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
<input type="checkbox"/>	Filing			\$	
<input type="checkbox"/>	Amendment			\$	
<input type="checkbox"/>	Extension of Time			\$	
<input type="checkbox"/>	Notice of Appeal/Appeal			\$	
<input checked="" type="checkbox"/>	Petition		<u>09/27/06</u>	\$	70.00
<input type="checkbox"/>	Issue			\$	
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$	
<input type="checkbox"/>	Maintenance			\$	
<input type="checkbox"/>	Assignment			\$	
<input type="checkbox"/>	Other			\$	
		7 TOTAL AMOUNT OF REFUND	\$ <u>70.00</u>		
8 TO BE REFUNDED BY:					
10 REASON:		Treasury Check			
<input checked="" type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:		
<input type="checkbox"/>	Duplicate Payment		<u>9 5 0 -- 1 0 7 1</u>		
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: <u>Frances Hicks</u>			TITLE: Petitions Examiner		
SIGNATURE: <u>Frances Hicks</u>			PHONE: x23218		
OFFICE: Office of Petitions					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****					
APPROVED: <u>Chubik</u>			DATE: <u>9/28/06</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B